DOCUMENT RESUME

ED 306 151 SO 019 799

TITLE	Perspectives: Using Historical Documents To Think about NIF Issues.
INSTITUTION	National Archives and Records Service (GSA), Washington, D.C.
PUB DATE	88
NOTE	13p.; Portions contain marginally legible type. Document printed on colored paper.
PUB TYPE	Guides - Classroom Use - Guides (For Teachers) (052)
EDRS PRICE	MF01/PC01 Plus Postage.
DESCRIPTORS	Acquired Immune Deficiency Syndrome; Controversial Issues (Course Content); Critical Thinking; *Current Events; *Educational Resources; Elementary Secondary Education; Health Care Costs; Health Insurance; *History; *History Instruction; Older Adults; *Primary Sources; *Resource Materials; Social Studies; Venereal Diseases; Welfare Services
IDENTIFIERS	Debt (Financial); *Historical Materials; National Issues Forum

ABSTRACT

The purpose of using historical documents in the classroom is to generate and enhance discussion by providing a historical perspective for issues. Five documents are included in this packet and are to be used as a supplemental material for the National Issues Forum (NIF) topics. Issues raised include (1) an analysis of the documents and (2) comparison of the choices involved in each topic. Two documents concern the U.S. government's policy toward venereal disease (VD) during World War I and World War II. Examination and discussion of these documents add historical perspective to the choices now faced in coping with AIDS. Questions focus on changes in attitude over time and similarities between AIDS control today and VD control as shown in the documents. The next two documents concern arguments in the mid-1930s about national health insurance. One is a letter to President Franklin D. Roosevelt from the Welfare Council of New York City. They can add historical perspective to contemporary issues of health care for the elderly. Questions focus on the role of the federal government toward individuals, the concept of social engineering, and state control of medicine, and "spreading the burden" of health care. The final document concerns the public debt in the mid-1950s during the first term of President Dwight D. Eisenhower. Examination and discussion of the document adds historical perspective to the current public debt controversy. Questions compare current and contemporary thought about reducing public debt and consider how the fear of communism was used to support balancing the federal budget. (GEA)

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Perspectives:

Using Historical Documents to Think About NIF Issues

A Note to Moderators

The Purpose of Using Historical Documents

The purpose of using these historical documents is not to divert discussion but to generate and enhance it by providing a historical perspective for each NIF issue. We expect certain themes will emerge: That federal policy changes, but policies are a product of the time in which they are made; that choices often do not change much over time, but the choice(s) made reflect the mores or tensions of the period (historical context); and that certain assumptions (or biases) underlie policy development. Because historical documents can be interpreted in several ways, there are no "right answers" to the discussion questions we have developed. The questions will have several answers and may provoke still more questions; this is the essence of historical inquiry.

How to Use These Questions

We recommend that you reproduce and distribute these documents, using questions to encourage discussion. Our questions are suggestions only. You may use them as they are, by removing this page and photocopying the remainder for group members, or you may modify the questions or replace them with ones you devise to suit the needs and level of your discussion group. You may also use only one or two questions or one document for an issue. You may even divide your discussion group into several small groups with each group addressing one or more questions and then reporting to the larger group.

Questions About Historical Background

We do not think it is necessary to be an expert in the historical background of these documents, and too much historical discussion may detract from discussion of the larger issue. We recommend that you encourage participants themselves to seek answers if they want more historical background for any document or time period. Secondary school or college teachers, in particular, may want to encourage further research.

About the National Archives

The National Archives and Records Administration preserves and makes available for research the permanently valuable documents created by the federal government. These discussion materials were developed by the Education Branch, Office of Public Programs, for the NIF. We welcome your suggestions and comments, and if you have questions or we can otherwise be of help, please contact: Linda Henry, Education Branch, National Archives, Washington, DC 20408, (202) 523-4867.

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Perspectives:

Using Historical Documents to Think About AIDS

Archival documents are the raw materials that researchers use to write history. The two documents reproduced here concern the federal government's policy toward venereal disease during World War I and World War II. An examination and discussion of these documents can add historical perspective to the choices Americans now face in coping with AIDS.

Document #1 is from the files of the Interdepartmental Social Hygiene Board, created by the Chamberlain-Kahn Act of 1919. Document #2 is an excerpt from a 1944 report prepared by the U.S. Public Health Service and the Office of War Information for use by the media in a national information program. Both documents are part of the records of the U.S. Public Health Service, which are held by the National Archives and Records Administration.

The following questions are in two parts: (1) an analysis of the contents of the documents and (2) a comparison of the choices for control of VD shown in the documents with those we face with AIDS.

Analyzing Content

1. What reasons are given in these documents for federal involvement in VD control? What reasons might be inferred?
2. How would you characterize the method of control of VD in document #1 versus that suggested in document #2? How do the documents show change over time?
3. What does document #2 imply about attitudes toward VD held by the general public? What changes do federal officials appear to want to effect?

Comparing Choices

1. In what ways is policy toward AIDS control today similar to that of VD control as shown in the documents? Different from it? Do either of these documents reflect our AIDS choices today? For example, Choice #1, reasserting moral standards? Choice #2, protecting the uninfected? Choice #3, taking practical measures? Choice #4, protecting civil liberties?
2. Do the documents give us any lessons to be learned about AIDS control today?
3. Which of the ways of controlling VD and AIDS seem constant over time?
4. How have our views of the federal government's responsibility for major societal problems changed since 1944 in ways that would affect our thinking about AIDS?

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COPY

DOCUMENT #1 (1 page)

HEADQUARTERS, FORT CROOK, NEBRASKA,
OFFICE OF THE POST COMMANDER

JHM:MEB

May 29, 1921.

eporting work of Mr. Fred O. Huss, Field Agent.

The Surgeon General of the Army, Washington, D. C.

1. I take pleasure in reporting to you that Field Agent Fred O. Huss, representing the U. S. Interdepartmental Social Hygiene Board called on the undersigned on May 11th, explained his mission and reported the bad conditions of the city of Omaha, with 41 open houses of prostitution, and asked for my cooperation and suggestions.

2. Mr. Huss has had conferences with the Mayor and other City Officials of the city of Omaha, and has succeeded in showing the city officials that a very bad condition existed in Omaha in regards to sources of infection for venereal disease which were a menace to the health of the soldiers of Fort Omaha and this Post.

3. Mr. Huss also brought to the attention of the city officials that forty-one open houses of prostitution were running in Omaha. The city officials have acted on the suggestions and reports of Mr. Huss, and started a campaign to close all houses of ill-repute and have arrested over one hundred prostitutes to date, with penalties of fines, jail sentences, and detention and treatment when found diseased.

4. Also, Mr. Huss, on May 23rd delivered a very able lecture on Sex Morality to the officers and enlisted men of this command. His lecture was just what the officers and enlisted personnel need.

5. The U. S. Interdepartmental Social Hygiene Board, through its Agent, Mr. Huss, has been a great power in stimulating the proper officials, both military and civil, to not only see, but do their full duty not only to the men in the military and Naval service but towards all mankind.

J. H. Neff,
Lieut. Colonel, 49th Infantry,
Commanding.

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(Title page excerpt)

U. S. Government
War Information Program

VENEREAL DISEASES CONTROL

Prepared by:

United States Public Health Service-
Office of War Information

January, 1944

(Excerpt, page 6)

VI. RECOMMENDED COPY THEMES

In addition to the copy themes included under IV, the following arguments should be stressed in informational materials, releases and statements, advertisements and broadcasts.

1. Use VD as well as "Venereal Disease." VD is a symbol, one that may be developed in the public consciousness, that can become as accepted as the letters, "TB" for tuberculosis, and that will assist in placing syphilis and gonorrhea as diseases, rather than principally as disgraces.

2. VD imposes a terrific social cost on the nation in terms of death, blindness, insanity, paralysis and sterility.

3. VD is a serious drain upon the nation's manpower: It hampers war production, reduces the number of men available for selective service, and cuts down the efficiency of those already in our armed forces.

4. Venereal diseases are highly infectious. They attack young people most often. They spread through sex contact. They contribute to and are spread further by delinquency, prostitution, promiscuity, ignorance, poverty and public indifference.

Reproduced from holdings of the National Archives, RG 287

5. Syphilis and gonorrhea must be brought out into the open. They must be discussed frankly as serious, infectious diseases, rather than as the consequence of "sin."

6. Syphilis and gonorrhea can be diagnosed accurately only by licensed physicians in private practice, in hospitals and in public or private clinics. They can be cured only by treatment received from those same sources.

7. No quack doctor, unethical druggist or patent medicine can cure VD. There is likely to be grave personal danger rather than cure.

8. It is suggested that wherever possible advertisements and other informational devices inform the reader where to go or whom to see for advice or treatment.

VII. COPY SUGGESTIONS

1. Approval of policy, and the medical and statistical content of all national material must be obtained from the Public Health Service before release. Similar clearance is necessary in local campaigns which must be sponsored by and organized around the medical control program of the State or local health department.

2. The approach and the execution of all advertising and other controlled information should be dignified and based upon a high concept of medical, social and personal ethics.

The program should be human, scientific, informational and educational. The "DO'S" and "DON'T'S" below outline a part of this conception.

DO'S

1. Present VD as a disease which is avoidable and curable.

2. Use the symbol "VD" and/or the names, syphilis or gonorrhea.

3. Present VD primarily from the human and medical angles.

4. Stress that truth and knowledge reduce VD.

5. Present VD as everybody's problem.

6. Stress importance of early treatment.

7. Explain importance of remaining under treatment.

8. Attack quackery, self-diagnosis and self-treatment.

9. Stress importance of case-finding and reporting of all VD contacts.

10. Emphasize the private physician as a treatment source equally with the public clinic.

DON'T'S

1. Don't say "social" disease.

2. Don't encourage self-diagnosis and self-treatment.

3. Don't present VD as only a prostitute problem.

4. Don't present VD as largely a race or geographic or low-income group problem.

5. Don't assume that the job is over when the infected person sees the doctor; the job also is to keep him under treatment.

6. Don't say "No one but you need know . . . " so that secrecy becomes an indispensable.

7. Don't over emphasize governmental responsibility for providing treatment.

8. Don't over stress such phobia-building things as photographs of needles and spinal punctures.

9. Don't over stress the sex aspects; morbid descriptions of the effects of sypnilis.

10. Don't associate the education program, directly or indirectly, with mechanical prophylaxis or contraceptive methods.

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Perspectives:

Using Historical Documents to Think About Health Care for the Elderly

Archival documents are the raw materials that researchers use to write history. The two documents reproduced here concern arguments in the mid-1930s about national health insurance. An examination and discussion of these documents can add historical perspective to the choices Americans now face about health care for the elderly.

The Social Security Act of 1935 formed the basis for federal assistance to the elderly. This legislation drew on recommendations of the Committee on Economic Security, appointed by President Franklin D. Roosevelt in 1934. The committee studied the issue of national health insurance and received a great many letters including those reproduced here, but it did not recommend such insurance. Committee files are part of the records of the Social Security Administration, which are held by the National Archives and Records Administration.

Analyzing Content

1. How do these documents differ in basic opinions regarding:
   - What is the role of the federal government toward the individual?
   - Who is responsible for the health of individuals?
   - Who is responsible for the financial risk of illness?
   - Who should have financial control of medical care?
2. Do you agree with the concept of "social engineering" in document #1?
3. Discuss the assertion in document #2 that health insurance is unsound and "leads to a longer illness, more dependency, and greater loss of time through illness."

Comparing Choices

1. Instead of the national health insurance discussed in these documents, we now have Medicare and Medicaid. What is the difference?
2. To what extent is the argument of "spreading the burden" relevant in discussing health care for the elderly today? To which Choice is it most related?
3. To what extent is the argument about "state control of medicine" relevant in discussing health care for the elderly today? To which Choice is it most related?

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THE

WELFARE COUNCIL

OF NEW YORK CITY

122 East 22nd Street, N. Y.

October 10, 1934

Hon. Franklin D. Roosevelt
President of the United States
Washington, D. C.

My dear Mr. President:

From among the millions of persons who are deeply interested in the social security plans on which your administration is at work, I am making bold to write and urge that careful consideration be accorded to the matter of spreading the heavy burdens of the cost of illness more equitably and more skilfully over the population. The essence of insurance is the spreading of risk. Since all of the studies of illness indicate that one of the major problems incident to getting adequate medical care for people, grows out of the fact that serious illness falls usually unexpectedly and with crushing weight of expense on a comparatively few people at any one time in the population, any social scheme which would spread this burden and lift it from the shoulders of the few, would be a measure of social engineering of very great value. Such insurance is a very large part of any scheme ~~of real social~~ security.

Sincerely yours,

Neva R. Deardorff

NRD/M

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President
CHARLES C. BURLINGHAM
Honorary Vice Presidents
MRS. NICHOLAS F. BRADY FELIX M. WARBURG
Vice Presidents
HENRY G. BARBEY JAMES H. POST
HON. HERBERT H. LEHMAN FREDERIC B. PRATT
GEORGE MACDONALD HON. ALFRED E. SMITH
Secretary
GEORGE J. HECHT
Treasurer
WINTHROP W. ALDRICH

Objectives:
1. Better Factual Basis for Community Planning
2. Better Team Work Among the Social Agencies
3. Better Standards of Social Work
4. Better Public Understanding of Social Work
5. Better Support of Social Work

Chairman, Executive Committee
HOMER FOLKS
Chairman, Finance Committee
JAMES H. POST
Executive Director
ROBERT P. LANE

K S STRICKLAND M D PRES C M CLARK M D V PRES O M GRAVES M D SEC TYEAS

The Gibson County Medical Society

Princeton, Indiana

—CENSORS—
H G PETITJEAN M D
H H ALEXANDER M D
G B BERESFORD M D

January 19, 1935

Edwin E. Witty, Sec.
Economic Security Commission
Washington, D. C.

Dear Sir:

The Gibson County Medical Society had a lengthy discussion upon the subject of "Health Insurance and the State Control of the Practice of Medicine." The Society, as a group and as individuals, are opposed to the idea of health insurance or the state control of medicine, since they feel that this is an encroachment upon the sacred right of the family physician and the patient.

They also feel that the above measures are detrimental to the high standards of the medical profession and toward the practice of scientific medicine. They further feel that no man or group of men is capable of interfering with or directing the program of caring for the indigent medical cases without a great loss in the funds which should be controlled by the medical profession for the benefit of all concerned.

We further ask that no political group be given the power to deal with the problems which concern the doctor and the care of the indigent. Health insurance in principle is unsound, and has been proven so in the majority of companies handling it. It leads to a longer illness, more dependency, and greater loss of time through illness.

We hope you will be able to see this as we do, and use your influence accordingly.

Yours truly,

GIBSON COUNTY MEDICAL SOCIETY

Orville M. Hours Sec.

J. L. Gilsab
Virgil H Canty
O. V. Brougton
S D Arthur
} Legis. Comm.

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Perspectives:

Using Historical Documents to Think About the Public Debt

Archival documents are the raw materials that researchers use to write history. The document reproduced here concerns the public debt in the mid-1950s during the first term of President Dwight D. Eisenhower. An examination and discussion of this document can add historical perspective to the choices Americans now face about the public debt.

This 1953 memo is from Ralph W. E. Reid, Assistant to the Director of the Bureau of the Budget, to the Director. The original memo is 10 pages long, but the excerpts here include only the introduction and conclusion. FY 55 refers to the 1955 fiscal year budget, which would have begun July 1, 1954. This document is from the records of the Bureau of the Budget, which are held by the National Archives and Records Administration.

Analyzing Content

1. What is the concern expressed in each of these conclusions about:
   The 1952 Republican Party platform?
   Previous Presidential administrations?
   Congress?
   The voters?
   The Soviet Union?

2. Are the concerns economic or political?

Comparing Choices

1. Do the concerns expressed in the documents resemble our current thinking about reducing the public debt? If not, how do they differ?

2. Would we agree today that domestic spending cuts are visible and military spending cuts are invisible? Why or why not?

3. How is the fear of communism used in this document to support balancing the federal budget? How is that fear used today?

November 30, 1953

MEMORANDUM FOR THE DIRECTOR

Subject: Security Expenditures and the FY 55 Budget

INTRODUCTION

Sometime in the near future there will come a moment when proposed FY 55 Budget expenditures are totalled up, FY 55 revenue estimates are available, and the magnitude of the probable FY 55 deficit will become apparent. At that time you will undoubtedly discuss with the President whether (a) to accept the indicated deficit or (b) to take drastic steps to curtail or eliminate it.

This memorandum is predicated upon the assumption that you will recommend the second alternative. It is further assumed that at that particular moment there will be only two significant ways remaining for bringing the Budget into balance: (a) reducing the military budget and (b) increasing corporate taxes.

[The following 8 pages of the original document are not reproduced here. They elaborate on the summary conclusion, shown below, which begins on page 9.]

CONCLUSION

The burden of the foregoing may be briefly summed.

The proposed Budget marks a complete failure to carry out Party and Administration promises to reduce military expenditures and to balance the Budget and thus undermines the very freedom it proposes to defend.

It suffers by comparison with this year's Budget and with the first "controllable" budgets of the Roosevelt and Truman eras.

It ramifies into an inability to carry out promised Administration programs in other fields because of the economy slashes which have been made to date in an attempt to achieve balance. It will lead to complications on Capitol Hill, because it presents an open invitation to Congress to make a display of trying to balance the Budget.

It will lead to political complications, because it will indicate that the last administration must also have faced up to and met comparable problems in this field, and was therefore not as wasteful and extravagant as has been claimed.

It will lead to complications with the voters, because benefits it purports to confer are in the national security field and relatively invisible, whereas, the benefits it denies are in the fields of human welfare and natural resources and are relatively visible.

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In its perpetuation of deficit financing as a way of life (22 years out of the last 25 with more apparently to come), the Budget flies in the face of warnings by Lenin ("The destruction of bourgeois society is brought about by the devastation of its monetary system."), Stalin ("The moment for the decisive blow...is when the free nations are in a state of practical bankruptcy."), and the President ("It has been coldly calculated by the Soviet leaders — for by their military threat they have hoped to force upon America and the free world an unbearable security burden leading to economic disaster... Communist guns...have been aiming at an economic target no less than at a military target...").

In essence, an unbalanced FY 55 Budget with military expenditures at the rate now anticipated appears to be precisely the type of Budget the President warned against one short year ago when he said:

> "...they say we can't do anything about these prices and about these (military) expenditures. (If so) our Budget is made in Moscow."

R. Reid